

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 12/4/02

2 Serial/Patent # 09/880,733

3 Please refund the following fee(s):

4 PAPER
NUMBER

5 DATE
FILED

6 AMOUNT

Filing

Amendment

Extension of Time

Notice of Appeal/Appeal

☒ Petition

Issue

Cert of Correction/Terminal Disc.

Maintenance

Assignment

Other

6

10/15/01

\$ 130 —

\$

\$

\$

\$

\$

7 TOTAL AMOUNT
OF REFUND

\$ 130 —

8 TO BE REFUNDED BY:

Treasury Check

☒ Credit Deposit A/C #:

9 20--1430

10 REASON:

Overpayment

Duplicate Payment

☒ No Fee Due (Explanation):

PTD error

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: E. Tarrone

TITLE: Pat. Atty.

SIGNATURE: [Signature]

PHONE: 306-9200

OFFICE: 4700

***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****

APPROVED: [Signature]

DATE: 12/5/02

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: